Best Available Copy

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

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1201	ワムノ	1406
$U \mathcal{I} \mathcal{I}$	771	100

CLAIMS AS FILED - PART I						SMALL ENTITY OTHER THA			THAN			
				Column 1) (Column 2)			T -	TYPE		OR	OR SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS 29 minu			us 20=	* 9			X\$ 9=		OR	X\$18=	162	
INDEPENDENT CLAIMS			3 minus 3 = *					X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	L	TOTAL		OR	TOTAL.	872
CLAIMS AS AMENDED - PART II								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
		(Column 1) CLAIMS		(Colu	mn 2) IEST	(Column 3)	1 r	SMALL E		OR	SWALL	
AMENDMENT A	14.7	REMAINING AFTER AMENDMENT	· # }	NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	T OL AINA	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	JETIPLE DEP	/ ENDEN	CLAIM		<u>ا</u> ا	+135=		OR	+270=	
						L	TOTAL		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)							ADDIT. FEE			ADDII. FEE	
	a state sink	(Column 1) CLAIMS	- 634 S	HIGI	HEST	(Column 3)	ר ר		ADDI-		***	ADDI-
AMENDMENT B	· edit che	REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CLAIM	]=	┨╏	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIN		┚╽	+135=		OR	+270=	
							L.	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)		10011.1 22		_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY ) FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL A114	=	┨╏	X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┛╽	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								ł	TOTAL			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE									OR	ADDIT. FEE	L	
	The "Highest Nun	nber Previously Pa	aid For" (Total o	r Indepen	dent) is the	e highest numb	er fou	ınd in the app	oropriate bo	x in co	olumn 1.	